

**DECLARATION AND POWER OF ATTORNEY**

**As a below named inventor, I hereby declare:**

That my residence, post office address and citizenship are as stated below next to my name.

That I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## LOCATOR SYSTEM FOR A CHILD

the specification of which (check one)

- (x) is attached hereto.  
( ) was filed on \_\_\_\_\_ as  
International Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_  
(if applicable)

That I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

That I acknowledge the duty to disclose information known to be material to patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

That I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate on this invention having a filing date before that of the application on which priority is claimed:

### Prior Foreign Application(s)

**Priority Claimed**

(Number)

(Country)

(Day/Month/Year Filed)

1

**Yes**

No

(Number)

(Country)

(Day/Month/Year Filed)

7

7

**Yes**

No

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

60/423,679  
(Application Number)

11/04/2002  
(Filing Date)

(Application Number)

(Filing Date)

United States Application(s)

I hereby appoint the following attorneys, with full power of substitution and revocation, to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith and request that all correspondence and telephone calls in respect to this application be directed to WELSH & KATZ, LTD., 120 South Riverside Plaza, 22<sup>nd</sup> Floor, Chicago, Illinois 60606, Telephone No. (312) 655-1500:

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Full name of sole or one  
joint inventor:

Edwina Cowell

Inventor's signature:

*Edwina Cowell*

Date:

Residence and Post Office Address:

1631 East Ridgewood Lane

Glenview, Illinois 60025

Citizenship:

U.S.A.

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